## FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION (Washington, D.C. 20549

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FORM D



NOTICE OF SALE OF SECURIFIES
PURSUANT TO REGULATION DESCRIPTION
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY
Serial

DATE RECEIVED

Name of Offering ( check if this is an amendment of Pardalis Software, Inc. 2004 Com				
	e 504 Rule 505 X Rule 506 Section 4(6)	ULOE		
	A. BASIC IDENTIFICATION DATA			
1. Enter the information requested about the issuer				
Name of Issuer ( check if this is an amendment	and name has changed, and indicate change.)			
Pardalis Software, Inc.				
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)		
424 S. Squires Street, Stillwater,	OK 74074	(405) 533-1960		
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)		
Brief Description of Business				
Development of an Internet accessible di	gital rights management technology syste	em		
	partnership, already formed other (p	processed		
Actual or Estimated Date of Incorporation or Organiz Jurisdiction of Incorporation or Organization: (Enter CN		nated MAR 0 9 200		

## GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control numbers.

SEC 1972 (6-02)

## A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter Check Box(es) that Apply: **x** Beneficial Owner **x** Executive Officer x Director General and/or Managing Partner Full Name (Last name first, if individual) Steven L. Holcombe Business or Residence Address (Number and Street, City, State, Zip Code) 424 S. Squires Street, Stillwater, OK 74074 Check Box(es) that Apply: Promoter **X** Beneficial Owner Executive Officer x Director General and/or Managing Partner Full Name (Last name first, if individual) Scot D. Holcombe Business or Residence Address (Number and Street, City, State, Zip Code) 424 S. Squires Street, Stillwater, OK 74074 Beneficial Owner Check Box(es) that Apply: Promoter **x** Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Kathleen Legako Business or Residence Address (Number and Street, City, State, Zip Code) 424 S. Squires Street, Stillwater, OK 74074 Check Box(es) that Apply: ☐ Beneficial Owner Director Promoter Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Executive Officer Check Box(es) that Apply: Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Check Box(es) that Apply: Promoter Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

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1.	Hac the	issuar sold	or does t	ha icenar i	stand to sa	11 to non a	caraditad i	nuactore in	this offer	in ~?		Yes	No
1.	<ol> <li>Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?</li></ol>									***************************************		x	
2.	•										\$ 6,00	00	
											Yes	No	
3.		e offering p			•							×	
4.	commis If a pers or states	sion or simi	lar remune ted is an ass me of the b	ration for s sociated pe roker or de	olicitation rson or age aler. If mo	of purchase ent of a brok ore than five	ers in conno cer or deale e (5) persoi	ection with r registered ns to be list	sales of sec d with the S ed are asso	curities in t SEC and/or	irectly, any he offering. with a state ons of such		
Ful	l Name (	Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (N	lumber and	d Street, Ci	ity, State, Z	Cip Code)					<u></u> ,	
Nar	ne of As	sociated Br	oker or De	aler									
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)			.,			••••••	☐ Al	1 States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (	Last name i	first, if ind	ividual)									
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Stat	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
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	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Ful	l Name (	Last name i	first, if ind	ividual)						y njur			
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Sta	tes in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers		——————————————————————————————————————				
	(Check	"All States	" or check	individual	States)							☐ Al	l States
	AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box x and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	2	\$
	Equity Common Stock		\$ 102,000
	Equity [x] Common ☐ Preferred	,,,,,,	3_102,000
	Convertible Securities (including warrants)	<b>.</b>	<b>C</b>
	Partnership Interests		
	Other (Specify)	-	\$ \$ 102,000
		102,000	\$_102,000
_	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	4	<b>\$ 102,000</b>
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$·
	Rule 504		\$
	Total		\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	<b>x</b>	\$_3,000
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)	-	\$
	Total		\$_3,000

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		§_99,000
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.		
		Payments to	
	N/A - Exchange offer resulted in no proceeds	Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	_	
	Purchase of real estate [		. 🗆 \$
	Purchase, rental or leasing and installation of machinery and equipment	\$	\$
	Construction or leasing of plant buildings and facilities	\$	
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another		<del>-</del>
	issuer pursuant to a merger)		
	Repayment of indebtedness	_	
	Working capital [		· <del></del>
	Other (specify):	\$	\$
		\$	. 🗆 \$
	Column Totals [	\$	. 🗆 \$
	Total Payments Listed (column totals added)		
ad. f	D-FEDERAL SIGNATURE		
The sigr	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commis information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of F	is filed under Ru sion, upon writte	
Issu	ner (Print or Type) Signature I	Date	
P	ardalis Software, Inc.	2/25/04	
	ne of Signer (Print or Type)  Title of Signer (Print or Type)		
Nar			

## - ATTENTION ---

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

## APPENDIX 5 1 Disqualification Type of security under State ULOE and aggregate Intend to sell (if yes, attach offering price Type of investor and to non-accredited explanation of investors in State offered in state amount purchased in State waiver granted) (Part C-Item 1) (Part E-Item 1) (Part B-Item 1) (Part C-Item 2) Number of Number of Accredited Non-Accredited State Yes No Investors Investors Yes No Amount Amount ALAK AZAR CACO CTDE DC FL GA HI ID Common Stock \$24,000 24,000 IL X INIA KS ΚY LA ME MD MA MI MNMS

# APPENDIX

1	2		3			4		5			
	to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
МО											
МТ											
NE											
NV											
NH											
NJ											
NM											
NY							·				
NC											
ND											
ОН											
ОК	X		Common Stock \$ 54,000	2	54,000						
OR											
PA											
RI							i				
sc											
SD											
TN											
TX	Х		Common Stock \$24,000	1	24,000						
UT											
VT											
VA						-					
WA											
wv											
WI											

#### APPENDIX 5 1 4 Disqualification Type of security under State ULOE and aggregate (if yes, attach Intend to sell to non-accredited offering price Type of investor and explanation of investors in State offered in state amount purchased in State waiver granted) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Non-Accredited Accredited State Yes No Investors Amount **Investors** Amount Yes No WY PR

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